

3736

PTO/SB/21 (09-04)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/041,030
	Filing Date	December 28, 2001
	First Named Inventor	Powers, Scott
	Art Unit	3736
	Examiner Name	Susan Ungar
Total Number of Pages in This Submission	Attorney Docket Number	018781-006810US

ENCLOSURES (Check all that apply)				
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement with PTO/SB/08A and PTO/SB/08B <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Cited References DA-DB; Return Postcard		
<table border="1"><tr><td>Remarks</td><td>The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.</td></tr></table>			Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Jean M. Lockyer, Ph.D.		
Date	1-7-05	Reg. No.	44,879

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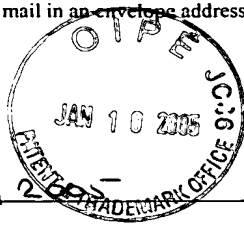
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On January 7, 2005

TOWNSEND and TOWNSEND and CREW LLP

By: [Signature]



PATENT
Attorney Docket No.: 018781-006810US
Client Ref.: T00-019-1US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

POWERS, et al.

Application No.: 10/041,030

Filed: December 28, 2001

For: DIAGNOSIS AND TREATMENT
OF CANCER USING MAMMALIAN
PELLINO POLYPEPTIDES AND
POLYNUCLEOTIDES

Examiner: Susan Ungar

Art Unit: 3736

SUPPLEMENTAL INFORMATION
DISCLOSURE STATEMENT UNDER 37
CFR §1.97 and §1.98

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The references cited on attached form PTO/SB/08A and PTO/SB/08B are being called to the attention of the Examiner. Copies of the references are enclosed.

Also enclosed is a copy of the Search/Examination report corresponding to the PCT application. The references were newly cited in the Examination report and were not previously disclosed.

It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

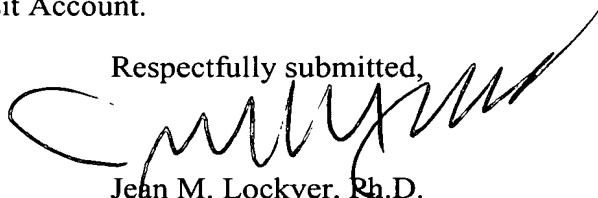
This IDS is being filed before the mailing date of the final Office Action or Notice of Allowance.

CERTIFICATION

I hereby certify that each item of information contained in this Information Disclosure Statement was first cited in any communication from a foreign patent office in a counterpart foreign application not more than three months prior to the filing of this statement.

Applicant believes that no fee is required for submission of this statement. However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,



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